



Sick Visits



Common Conditions That Make Kids Sick

1. Coughs and colds
2. Diarrhea
3. Earaches
4. Sore throat

If your child is presenting any or all of these conditions, you will want to schedule a sick visit with the doctor.

Contagious Infections in Children

It's easy to say to say, "keep the children home," when illness strikes. The problem is, kids can be exposed to and spread an infection before symptoms appear. That's why it helps to recognize and prevent common illnesses that plague children, including flu, pink eye, and gastroenteritis. These tips from healthcare experts can help.

5 Basic Prevention Strategies

To keep contagious diseases at bay, begin with basic hygiene:

1. Always wash your hands before touching your mouth, nose, or eyes. Teach your children to wash their hands before eating.
2. Don't share items like cups, spoons, forks, straws, towels, pillows, or toiletries.
3. Cover up with a tissue when you cough or sneeze, then toss the tissue. Or cough into your arm.
4. To keep immunity up, make sure you and your children are well-rested and eat right.
5. Approach hand washing as a survival skill -- it is.

4 Quick Tips for Hand Washing

Washing hands often is the single most effective way to prevent spreading contagious diseases. To wash up well:

1. Wet your hands and apply liquid or bar soap.
2. Scrub all surfaces for 15 to 20 seconds.
3. Rinse well and dry your hands.
4. No soap and water? Use alcohol-based disposable hand wipes or gel sanitizers.

Children and adults should wash their hands:

- Before and after preparing food
- Before eating
- After using the bathroom
- After handling animals or their waste
- After coughing or sneezing
- More frequently if someone at home is sick

What to Disinfect and How

To stop germs in their tracks, the Centers for Disease Control and Prevention recommend virus-killing chlorine bleach. Add one-fourth cup bleach to one gallon of warm water and allow the mixture to sit on surfaces for 10 minutes before rinsing. When disinfecting, wear rubber gloves, a mask if you're sensitive to chemicals, and ventilate the area. Then disinfect:

- Phones
- Stair railings
- Countertops
- Bathroom surfaces (toilet seats, handles, faucets)
- Remote controls
- Microwaves and refrigerator handles
- Door handles
- Light switches
- Toys

Coughing

A cough is usually a sign your child's body is trying to rid itself of an irritant, from mucus to a foreign object. Common causes of cough include:

- **Infection.** Colds, flu, and croup can all lead to a lingering cough for kids. Colds tend to cause a mild to moderate hacking cough; the flu a sometimes severe, dry cough; while croup has a "barking" cough with noisy breathing. Medication can't cure colds or flu, but hard candies or cough drops can help relieve a sore throat caused by coughing. Because of choking hazards, only give hard candies or cough drops to children over age 4. Moist air can help children cope with croup; try a warm, steamy bathroom, or cool morning air. For lingering coughs due to asthma, your child may need to take steroids or other medications prescribed by the doctor.
- **Acid reflux** symptoms in children may include coughing, frequent vomiting/spitting up, a bad taste in the mouth, and heartburn. Treatment for reflux depends on a child's age, health, and other issues. Try these three tips: Remove trigger foods from their diet (often chocolate, peppermint, and fatty foods). Eat at least two hours before bedtime. And eat smaller meals. See your doctor if you are concerned about your child's acid reflux.
- **Asthma** can be tough to diagnose because symptoms vary from child to child. But a wheezing cough, which may get worse at night, is one of many asthma symptoms. Treatment for asthma depends on what's causing it, and may include avoiding triggers like pollution, smoke, or perfumes. See your doctor if you think your child has asthma symptoms.
- **Allergies/Sinusitis** can cause a lingering cough, as well as an itchy throat, runny nose, sore throat, or rash. Talk to your child's doctor about allergy tests to find out which allergens cause the problem, and ask for advice on how to avoid that allergen. Allergens can include food, pollen, dander, and dust. Your doctor may also recommend allergy medication or allergy shots.
- **Whooping cough**, also called pertussis, is characterized by back-to-back coughs, followed by an inhale that has a "whooping" sound. Other symptoms may include runny nose, sneezing, and low fever. Whooping cough is contagious, but easy to prevent with a vaccine. Whooping cough is treated with antibiotics.
- **Other reasons children cough:** A child may also cough out of habit after having been sick with a cough; after inhaling a foreign body like food or a small toy; or after exposure to irritants like pollution from cigarettes or fireplace smoke.

Diarrhea

Diarrhea is the body's way of ridding itself of germs, and most episodes last a few days to a week. Diarrhea often occurs with fever, nausea, vomiting, cramps, and dehydration. Some of the most common reasons kids get diarrhea include:

- **Infection** from viruses like rotavirus, bacteria like salmonella and, rarely, parasites like giardia. Viruses are usually the cause of a child's diarrhea. Along with loose stool, symptoms of a viral gastroenteritis infection often include vomiting, stomach ache, headache, and fever.

When treating viral gastroenteritis—which can last 5-14 days—it's important to prevent fluid loss. Offer additional breast milk or an oral rehydration solution (ORS) to infants and young children. Water alone doesn't have enough sodium, potassium, and other nutrients to safely rehydrate very young children. Be sure to talk to your doctor about the best way to get fluids back into your child.

Older children with diarrhea can drink anything they like to stay hydrated, including ORS and brand-name products (their names usually end in "lyte"). Popsicles can also be a good way to get fluids into a child who's been vomiting and needs to rehydrate slowly.

Be sure to consult with a doctor if you have travelled outside of the country recently. Your child may need medical care.

- **Medications** like laxatives or antibiotics can also lead to diarrhea in children as well as adults.

For mild diarrhea caused by medication, keep your child safely hydrated. If antibiotics are causing your child's diarrhea, be sure to continue the medication and call your doctor. Your doctor may recommend reducing the dose or switching to a different antibiotic.

Studies show that yogurt with live cultures or probiotics can help ease diarrhea caused by antibiotics. Cultures and probiotics help replenish healthy gut bacteria killed by antibiotics.

- **Food poisoning** can also cause diarrhea in kids. Symptoms usually come on quickly, may include vomiting, and tend to go away within 24 hours.

Treatment for food poisoning-related diarrhea is the same as for the diarrhea caused by infection: Keep your child hydrated and call your doctor with any questions.

- **Other causes of diarrhea** include irritable bowel disease, Crohn's disease, food allergies, and celiac disease. If you're not sure what's causing your child's diarrhea, give your doctor a call.

Children and Diarrhea: Recognizing Dehydration

Dehydration is one of the most worrisome complications of diarrhea in children. Mild diarrhea usually doesn't cause significant fluid loss, but moderate or severe diarrhea can.

Severe dehydration is dangerous; it can cause seizures, brain damage, even death. Know the signs of dehydration. Call your doctor if your child has:

- Dizziness and light-headedness
- Dry, sticky mouth
- Dark yellow urine, or very little or no urine
- Few or no tears when crying
- Cool, dry skin

- Diarrhea usually goes away in a few days, but it can lead to complications. If your child has any of these symptoms, don't wait, get help.
- **Call 911 if your child:**
- Is too weak to stand up
- Is confused or dizzy
- **Call your doctor right away if your child:**
- Seems very sick
- Has had diarrhea more than three days
- Is younger than 6 months old
- Is vomiting blood
- Can't hold down fluids or has vomited more than two times
- Has a fever over 105° F; or is under 6 months with a fever over 100.4° F taken rectally. (Do not give infants fever medicine.)
- Seems dehydrated
- Has bloody stool
- Is less than a month old with three or more episodes of diarrhea
- Passes more than four diarrhea stools in eight hours and isn't drinking enough
- Has a weak immune system
- Has a rash
- Has stomach pain for more than two hours
- Lack of energy

Earaches

If your child has an earache that is accompanied (in some cases) by a stuffy or runny nose and a sore throat and fever, it is likely that the ear pain is due to an ear infection. Your doctor will most likely examine the eardrum with an instrument called an otoscope for signs of infection—not an easy task if the patient is a fussy infant. The doctor may also check for blockage or filling of the middle ear using a pneumatic otoscope, which blows a little air at the eardrum. This air should cause the eardrum to move a little back and forth. If fluid is present, the eardrum will not move as easily.

Understanding Ear Infections

One test for ear infections is tympanometry, which uses sound and air pressure to check for fluid in the middle ear. If needed, an audiologist will perform a hearing test to determine if there is hearing loss. On rare occasions, when the person is quite ill, a doctor may make an opening in the eardrum, draw out a sample of fluid from the middle ear to culture the sample in a lab. This more extreme measure is usually used only for serious or particularly stubborn infections.

What Are the Treatments for Ear Infections?

The goal of treatment for most doctors is to rid the middle ear of infection before more serious complications set in. Treatment usually involves eliminating the causes of the ear infection, killing any invading bacteria, boosting the immune system, and reducing swelling in the Eustachian tube.

Conventional Medicine for Ear Infections

An ear infection is often caused by a virus, in which case the only relief doctors can offer is treatment of the symptoms. If a person has an upper respiratory infection causing a lot of congestion and swelling of membranes (including the Eustachian tube), medicines which dry up the congestion may be helpful. However, if there is only an ear infection without congestion or drainage, decongestants and antihistamines are not helpful and should not be used because of possible side effects (drowsiness, jitteriness, blurred vision).

To ease the pain of an ear infection, your doctor may recommend a pain reliever, typically acetaminophen or ibuprofen, which also helps reduce a fever. Aspirin should be avoided in children because of the threat of Reye's syndrome.

Sometimes, it is difficult for your doctor to tell with an otoscope alone if the ear infection is of viral or bacterial origin, so deciding on a proper course of treatment isn't always easy. A debate over using antibiotics (bacterial-killing drugs) to treat middle ear infections arose in the 1990's as more bacteria became resistant to antibiotics. Some doctors initially treat only the symptoms of an ear infection, without antibiotics, a response that has been supported by studies on children 2 years and older.

Amoxicillin is the antibiotic of choice for treating bacterial ear infections. The drug is highly effective: A single course of amoxicillin can usually knock out an ear infection in seven to 10 days, at little cost. However, some types of bacteria have grown resistant to amoxicillin; critics of heavy antibiotic use in the U.S. point out that the millions of prescriptions of amoxicillin for ear infections that were not bacterial in origin helped to create these resistant bacterial strains. If an ear infection causes serious complications or if fluid remains in the ear for more than three months, physicians may suggest Myringotomy with PE (pressure equalizing) tube insertion surgery to eliminate infection or drain the middle ear. Because not enough air is coming through the Eustachian tube to ventilate and dry out the middle ear, a little tube, less than half an inch long, is placed into the ear drum. The tube, which will usually fall out on its own in about a year, keeps a hole open in the eardrum so that air can get into the middle ear space and dry it out. A ventilation tube reduces pain, improves hearing, and cuts down on the amount of infections your child may have.

This procedure rarely leads to infection or scarring and usually provides long-term results. If after the tubes come out the ear infections return, it means your child hasn't outgrown the problem and a second set of tubes will usually be recommended. This time, an adenoidectomy -- surgery to remove the adenoids -- will also be suggested in an attempt to unblock the Eustachian tube as much as possible, and to avoid inserting a third set of tubes.

Sore Throat

Since most sore throats from infections are caused by viruses related to colds, antibiotics—used for bacteria—are not usually needed to speed recovery from a sore throat. Treatment for sore throats and colds from viruses are treated to relieve symptoms, so home remedies may be just as effective as over-the-counter or prescription medicines. Some sore throats, such as that with strep throat, do require an antibiotic. Check with your doctor to be sure.

Home Remedies for a Sore Throat

- Get plenty of rest and drink a lot of fluids.
- Gargle with warm salt water (1 teaspoon of salt per glass of water).
- Suck on throat lozenges or hard candy.
- Suck on frozen treats (such as Popsicles).
- Use a humidifier.
- Sip chicken broth, or try warm tea with honey, which has been a long-standing and comforting remedy.
- To help relieve the pain, apply a warm heating pad or compress to your throat. You can also try a warm chamomile poultice: Mix 1 tablespoon dried chamomile flowers into 1 or 2 cups boiling water; steep for 5 minutes, then strain. Soak a clean cloth or towel in the tea, wring it out, then apply to your throat. Remove the cloth when it becomes cold. Repeat as often as necessary.
- A salt plaster may also help provide relief. Mix 2 cups sea salt with 5 to 6 tablespoons lukewarm water. The salt should be damp, but not wet. Place the salt in the center of a dishtowel, then roll the towel along the longer side. Wrap the towel around your neck; cover it with another dry towel. Leave on for as long as you wish.
- Try steam inhalations to ease the pain. Run very hot water in a sink. With a towel draped over your head to trap the steam, lean over the sink while the hot water is running. Breathe deeply through your mouth

and nose for 5 to 10 minutes. Repeat several times a day. Always be careful not to burn yourself with the hot water or steam.

- Take acetaminophen or ibuprofen or naproxen for pain relief.

For more information about this subject please check:

The Center for Disease Control at www.cdc.gov/

The American Academy of Pediatrics at www.aap.org